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SERIAL NUMBER 10/724,010	FILING DATE 11/25/2003 RULE	CLASS 623	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. 6700-0005.21 CI01- U03.US3
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/305,652 11/27/2002
 which is a CIP of 10/160,667 05/28/2002 ABN
 which claims benefit of 60/293,488 05/25/2001
 and claims benefit of 60/363,527 03/12/2002
 and claims benefit of 60/380,695 05/14/2002
 and claims benefit of 60/380,692 05/14/2002

Yes, PPR

** FOREIGN APPLICATIONS *****

no PPR

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 02/27/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 33	TOTAL CLAIMS 64	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>P. P.</i>	Initials <i>P. P.</i>		

ADDRESS

45081
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TITLE

Patient selectable joint arthroplasty devices and surgical tools facilitating increased accuracy, speed and simplicity in performing total and partial joint arthroplasty

<p>FILING FEE RECEIVED 1212</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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